15/01/2019 LD-2 Disclosure Form

Clerk of the House of Representatives Legislative Resource Center B-106 Cannon Building Washington, DC 20515 http://lobbyingdisclosure.house.gov Secretary of the Senate Office of Public Records 232 Hart Building Washington, DC 20510 http://www.senate.gov/lobby

## LOBBYING REPORT

Lobbying Disclosure Act of 1995 (Section 5) - All Filers Are Required to Complete This Page

| <ol> <li>Registrant Name  Organization/Lobbying Firm  Self Employe<br/>Syngenta Crop Protection N.V.</li> </ol>   | d Individual   |  |
|---|--|--|
| 2. Address<br>Address1 Louizalaan 489   | Address2   |  |
| City Oosterzele State   | e —— Zip Code <u>9860</u>  | Country <u>BEL</u>                               |
| 3. Principal place of business (if different than line 2)   |  |  |
| City State  | Zip Code   | Country  |
| 4a. Contact Name       b. Telephone No.         Mr.       Angus Kelly       2023717559  | Number c. E-mail Angus.Kelly@syngenta.com  | 5. Senate ID#<br>401103641-12                    |
| 7. Client Name  Self  Check if client is a state Syngenta Crop Protection N.V.  | 6. House ID#<br>429050001  |  |
| . –   | Date 12/31/2015 11. No Lobbying Issu U MUST complete either Line 12 or Line  | ,  |
| INCOME relating to lobbying activities for this reporting period was:  Less than \$5,000  \$5,000 or more  Provide a good faith estimate, rounded to the nearest \$10,000, of all lobbying related income from the client (including all payments to the registrant by any other entity for lobbying activities on behalf of the client). | 13. Organizations  EXPENSE relating to lobbying activities for this re  Less than \$5,000  \$5,000 or more  \$ 10,000.00  14. REPORTING Check box to indicate expense a See instructions for description of options.  ## Method A. Reporting amounts using LDA defined the Method B. Reporting amounts under section 60 Internal Revenue Code    Method C. Reporting amounts under section 16 Revenue Code | ccounting method.  nitions only  33(b)(8) of the |
| Signature Digitally Signed By: Angus Kelly  |  | 1/20/2016<br>11:26:57 AM                         |

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|                             |                                   |                           |                     | n which the registrant engaged in on as requested. Add additional p |           |        |
|-----------------------------|-----------------------------------|---------------------------|---------------------|---|-----------|--------|
| 15. General issue area coo  | de TRD                            |                           |                     |   |           |        |
| 16. Specific lobbying issu  | ies                               |                           |                     |   |           |        |
| Issues related to Transatla | antic Trade and Investment Pa     | urtnership.               |                     |   |           |        |
|                             |                                   |                           |                     |   |           |        |
| 17. House(s) of Congress    | and Federal agencies              | Check if None             |                     |   |           |        |
| U.S. SENATE, U.S. HOU       | JSE OF REPRESENTATIVE             | S, U.S. Trade Representa  | ative (USTR), Ag    | griculture - Dept of (USDA)   |           |        |
| 18. Name of each individ    | ual who acted as a lobbyist in    | this issue area           |                     |   |           |        |
| First Name                  | Last Name                         | Suffix                    | Cover               | ed Official Position (if applicable                                 | e) N      | New    |
| Angus                       | Kelly                             |                           |                     |   |           |        |
|                             | n entity in the specific issues   |                           |                     | rmation has changed.  |           |        |
| 20. Client new address      |                                   |                           |                     | _   |           |        |
| Address                     |                                   |                           |                     |   |           |        |
|                             |                                   |                           | tate                | Zip Code  | Country   |        |
| 21. Client new principal p  | place of business (if different t | than line 20)             |                     |   |           |        |
| City                        |                                   | Si                        | tate                | Zip Code  | Country _ |        |
|                             | ion of client's business or acti  |                           |                     |   |           |        |
|                             |                                   |                           |                     |   |           |        |
| LOBBYIST UPDA               | ATE                               |                           |                     |   |           |        |
|                             | usly reported individual who is   | s no longer expected to a | nct as a lobbyist f | or the client   |           |        |
|                             |                                   |                           |                     |   |           |        |
| First Name                  | Last Name                         |                           | First Name          | Last Name   | S         | Suffix |
| 1                           | <u> </u>                          | 3                         |                     |   |           |        |
| 2                           | <del></del>                       | 4                         |                     |   |           |        |
| ISSUE UPDATE                |                                   |                           |                     |   |           |        |
|                             | o that no langua mantaina         |                           |                     |   |           |        |
| 24. General lobbying issu   | te that no longer pertains        |                           |                     |   |           |        |
|                             |                                   |                           |                     |   |           |        |
| AFFILIATED OR               | RGANIZATIONS                      |                           |                     |   |           |        |
| 25. Add the following aff   | iliated organization(s)           |                           |                     |   |           |        |
| Internet Address:           |                                   |                           |                     |   |           |        |
|                             |                                   |                           |                     |   |           |        |

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| N.                         | Charle A Address                       | Address                      |                   |                         | Principal Place of Business |
|----------------------------|--|------------------------------|-------------------|-------------------------|-----------------------------|
| Name                       | Street Address<br>City                 | State/Province Zip           | Country           | (city and state or coun |                             |
|                            |  |                              |                   | City                    |                             |
|                            |  |                              |                   | State                   | Country                     |
|                            |  |                              |                   |                         |                             |
| 26. Name of each previousl | ly reported organization that is no lo | nger affiliated with the reg | istrant or client |                         |                             |

27. Add the following foreign entities:

| Name | Address Street Address City State/Province Country |  |               | Principal place of business (city and state or country) |  | Ownership<br>percentage in<br>client |
|------|--|--|---------------|---|--|--------------------------------------|
|      |  |  | City<br>State | Country   |  | %                                    |

| 28 | Name o | f each | previously | v reported foreign ent | ity that no longer | owns, or controls | or is affiliate | d with the res | istrant client | or affiliated or | ganization |
|----|--------|--------|------------|------------------------|--------------------|-------------------|-----------------|----------------|----------------|------------------|------------|
|    |        |        |            |                        |                    |                   |                 |                |                |                  |            |

| 1 | 3 | 5 |
|---|---|---|
| 2 | 4 | 6 |